

Testimony of Wes Studi
“A Way Out of the Diabetes Crisis in Indian Country and Beyond”
Senate Committee on Indian Affairs
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Chairman Dorgan, Vice Chairman Barrasso, other members of the Committee, I am honored to be here this morning. Thank you for the opportunity to participate in today’s oversight hearing entitled “A Way Out of the Diabetes Crisis in Indian Country and Beyond.”

My name is Wes Studi and I am an enrolled member of the Cherokee Nation. While I currently reside in New Mexico, I was born in Nofire Hollow, Oklahoma (between Stillwell and Tahlequah). As the son of a ranch worker, I attended a number of elementary schools growing up but settled on the Chilocco Indian Boarding School in Northern Oklahoma as a teenager. My first language is Cherokee and I strongly believe in the importance of handing down our language, customs, and rich traditions from one generation to the next. I have written two children’s books in Cherokee for the Cherokee Bilingual/Cross Cultural Education Center.

I am proud to have served our nation in combat during the Vietnam War, and I am very fortunate to have a successful film career. I have played roles in several major motion pictures including, “Dances with Wolves,” “Last of the Mohicans,” “Geronimo: An American Legend,” and most recently “Avatar.” In my film career I have often portrayed fearless leaders who have battled and fought against formidable challenges.

I am also very proud to be here today to honor the leaders in American Indian and Alaska Native communities who have committed themselves to the fight against diabetes.

The Burden of Diabetes in American Indian/Alaska Native Populations

I'm not a scientist or a doctor; I am a tribal community member, who fully understands the toll diabetes has taken, reaching far beyond our tribal communities. Clearly, the United States has a diabetes epidemic on its hands. While we are now beginning to see the costly and damaging effects of this disease in rest of the nation, it is a problem that is all too familiar for those of us in Indian Country. For years, type 2 diabetes has ravaged tribal communities and has had a devastating physical, emotional, and spiritual impact on our people. I have family and friends living with diabetes and I know people in our community who have endured amputations and other devastating complications of diabetes as a result of not having access to quality diabetes care.

Our American Indian and Alaska Native communities have the highest rates of diabetes – more than double the prevalence of the general population. In some of our communities, more than half of all adults have been diagnosed with diabetes and diabetes in our youth is on the rise. We suffer the highest rates of complications and mortality from diabetes, *more than three times* the national average. We are getting diabetes at earlier ages and are dying in greater numbers from the disease when compared with the rest of the nation.

The Battle Against Diabetes

However, our story is not just one of suffering, misery and despair -- it is also a story of great perseverance, determination and hope for the future. Tribal communities have come together to fight back against diabetes and the destruction it has wrought. Across Indian Country, there are inspiring stories of elders, community leaders, women, men, and even children, who have been empowered with the knowledge and tools to effectively combat this disease.

This great work and progress is not accomplished by tribal communities alone. It takes a partnership with, and resources from, the federal government to support the continued research, education, outreach, and range of services that have gone into this momentous effort. The successes of the Special Diabetes Program (SDP) in particular demonstrate what can be accomplished when we work together.

Established more than a decade ago, the Special Diabetes Program, made up of the Special Diabetes Program for Indians (SDPI) and the Special Diabetes Program for Type 1 Diabetes, has made significant strides against this disease and have dramatically improved the lives of those with, and at risk for, diabetes. The SDPI now has a presence in 35 states and supports over 450 Indian Health Service, Tribal and Urban Indian health programs. It has allowed tribal communities to implement a wide range of strategies to address the burden of diabetes in a manner that is most effective and culturally appropriate for our diverse and unique communities. These efforts have shown great success in managing the disease by delaying or

eliminating the development of complications, and in some people, preventing the onset of diabetes all together.

Taking Control

The American Diabetes Association, the National Indian Health Board, and the Juvenile Diabetes Research Foundation recently joined together to collect stories from the many people whose lives have benefitted from the Special Diabetes Program. The strength, courage and resolve of these citizens rival any of the characters I have portrayed on the big screen. I would like to highlight the story of one woman from North Carolina who has taken control of her diabetes and her life. Ulela Harris of the Eastern Band of Cherokee Indians was diagnosed with diabetes in 1993. Although she had eight brothers and sisters with diabetes and lost both her father and sister to complications from the disease, she still didn't understand what diabetes was and lacked the knowledge to manage it effectively. At the time of her diagnosis, there was limited clinical support for diabetes management and she was seen by a nutritionist and sent home with medications. After many years of insulin injections and oral medications, her blood sugar levels were still dangerously high. In 2007, Ulela joined the Cherokee Diabetes Prevention Program, which provided her access to the critical case management and diabetes education she needed to self manage her diabetes. One year later, she was able to bring her diabetes under control and no longer required insulin or oral diabetes medications. Through this program, she lost 35 pounds and has been motivated to take on new challenges, such as the first annual Cherokee Ironman-Ironwoman Triathlon.

It is through the power of story that our American Indian and Alaska Native culture and traditions are passed on from one generation to the next. Ulela's story is one of the many being told throughout our communities that are gradually replacing stories of the fear and pain of diabetes with new stories of inspiration and hope for our future generations.

Hope for the Future

Native people have made significant contributions to the current understanding of effective diabetes treatment and prevention. The research conducted among the Pima Indians in the early 1960's alerted this nation to the epidemic of diabetes. Today, we are proving that, given the appropriate resources and tools to address diabetes, we can make great progress in conquering the challenges of diabetes and saving lives.

While we have hope for the future, the journey is far from over. To continue on this path of hope and progress, we need more resources to conduct research, provide assistance, and purchase the medications necessary to sustain and expand our SDPI diabetes treatment and prevention programs.

I would like to personally thank you Chairman Dorgan for your commitment to the health and well being of our Native people, especially for your leadership to reauthorize the Special Diabetes Program. With ongoing support from members of this committee, the Congress, tribal communities, and the Indian health system, we can continue to work in partnership to change the landscape of diabetes and transform the overall health and wellness of American Indian and Alaska Native people. Together, we can continue to fight diabetes, for our ancestors, our tribal communities and our future generations.

Thank you for the opportunity to be here before you today. I would be happy to answer any questions you may have for me.